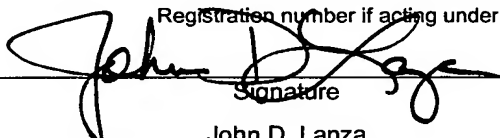


PTO/SB/22 (12-04)

Approved for use through 7/31/2006. OMB 0651-0031

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|---|------------|---|-------------|
| REQUEST FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | | Docket Number: CXT-113 | |
| Application Number 10/711732-Conf. #5731 | | Filed September 30, 2004 | |
| For METHOD AND APPARATUS FOR PROVIDING FILE-TYPE ASSOCIATIONS TO MULTIPLE APPLICATIONS | | | |
| Art Unit 2122 | | Examiner Not Yet Assigned | |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): | | | |
| | <u>Fee</u> | <u>Small Entity Fee</u> | |
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$120 | \$60 | \$ |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$450 | \$225 | \$ |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1020 | \$510 | \$ |
| <input checked="" type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1590 | \$795 | \$ 1,590.00 |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2160 | \$1080 | \$ |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. | | | |
| <input type="checkbox"/> A check in the amount of the fee is enclosed. | | | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | | |
| <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. | | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>12-0080</u> . I have enclosed a duplicate copy of this sheet. | | | |
| I am the <input type="checkbox"/> applicant/inventor. | | | |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). | | | |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>40,060</u> | | | |
| <input type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 _____ | | | |
|  Signature | | <u>April 8, 2005</u> Date | |
| <u>John D. Lanza</u> Typed or printed name | | <u>(617) 227-7400</u> Telephone Number | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | | |
| <input type="checkbox"/> Total of <u>1</u> forms are submitted. | | | |

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV553865617US, in an envelope addressed to: MS Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: April 8, 2005

Signature:  (John D. Lanza)

04/12/2005 RFEKADUI 00000002 120080 10/711732

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04 FC:1202 850.00 DA